U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of ALMA L. JACKSON and DEPARTMENT OF VETERANS AFFAIRS, MEDICAL CENTER, Buffalo, NY

Docket No. 98-2501; Submitted on the Record;
Issued February 18, 2000

DECISION and ORDER

Before MICHAEL J. WALSH, GEORGE E. RIVERS,
BRADLEY T. KNOTT

The issue is whether appellant met her burden of proof in establishing that she sustained right wrist tenosynovitis in the performance of duty.

The Board has duly reviewed the case record in the present appeal and finds that the Office of Workers' Compensation Programs properly determined, in its November 5, 1997 decision, that appellant failed to meet her burden of proof in establishing that she sustained a medical condition caused by her employment. An employee seeking benefits under the Federal Employees' Compensation Act[1] has the burden of establishing the essential elements of his or her claim including the fact that the individual is an "employee of the United States" within the meaning of the Act, that the claim was timely filed within the applicable time-limitation period of the Act, that an injury was sustained in the performance of duty as alleged and that any disability and/or specific condition for which compensation is claimed are causally related to the employment injury.[2] These are essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.[3]

There is no dispute that appellant is a federal employee, that she timely filed her claim for compensation benefits, and that the workplace incidents or exposure occurred as alleged. However, the medical evidence is insufficient to establish that appellant sustained an injury in the performance of duty.[4]

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[1] 5 U.S.C. §§ 8101-8193.

[2] *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

[3] *Victor J. Woodhams*, 41 ECAB 345 (1989).

[4] Part of a claimant's burden of proof includes the submission of rationalized medical evidence based upon a complete factual and medical background showing causal relationship between the claimed injury and employment factors; *see Mary J. Briggs*, 37 ECAB 578 (1986); *Joseph T. Gulla*, 36 ECAB 516 (1985).

Accompanying the claim, appellant submitted a September 2, 1997 CA-20 attending physician's report from Dr. L.A. Sifontes, a Board-certified internist, who stated that appellant noted tingling in her right hand while mopping a floor on August 26, 1997. He checked a box to indicate that appellant might have a preexisting condition, diagnosed tenosynovitis of the right wrist, and checked a box "yes" to indicate that the diagnosed condition was caused or aggravated by her employment. However, Dr. Sifontes provided no medical rationale explaining how a particular work factor would have caused or aggravated appellant's condition. The Board has held that an opinion on causal relationship which consists only of a physician checking "yes" on a medical form report without further explanation or rationale is of little probative value.[5] Although the Office, on October 2, 1997, requested that Dr. Sifontes provide a reasoned medical opinion addressing whether the reported work incident caused or aggravated appellant's claimed injury, his other reports do not address the cause of appellant's condition. A September 23, 1997 report from a physical therapist is also insufficient to establish appellant's claim as a physical therapist is not a physician as that term is defined in the Act.[6] Consequently, appellant has not submitted sufficient medical evidence to establish that her right wrist tenosynovitis was caused or aggravated by employment factors. In view of this, appellant has not met her burden of proof in establishing that she sustained an injury in the performance of duty.[7]

The November 5, 1997 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, D.C.
February 18, 2000

Michael J. Walsh
Chairman

George E. Rivers
Member

Bradley T. Knott
Alternate Member

[5] *Alberta S. Williamson*, 47 ECAB 569 (1996).

[6] *See* 5 U.S.C. § 8101(2). This subsection defines the term "physician." *See also Charley V.B. Harley*, 2 ECAB 208, 211 (1949) (where the Board held that medical opinion, in general, can only be given by a qualified physician).

[7] On appeal, appellant has submitted new evidence. However, the Board may not consider such evidence for the first time on appeal; *see* 20 C.F.R. § 501.2(c).